

Grant Application

Department of Criminal Justice Services, 805 East Broad Street, Richmond, Virginia 23219

Grant Program:	Virginia Domestic Violence Victim Fund		
Applicant:			
Applicant Federal ID Number:			
Jurisdiction(s) Served:			
Program Title:			
Grant Period:	July 1, 2005 – December 31, 2006		
Type of Application:	<input type="checkbox"/> New <input type="checkbox"/> One-time request		
	Project Director	Project Administrator	Finance Officer
Name:			
Title:			
Address:			
Phone:			
Fax:			
E-mail:			
Signature of Project Administrator:			
Brief Project Description:			
Project Budget Summary	DCJS Funds		Total
	Federal	State	
Personnel	\$ XXXXXXXXXXXX	\$	\$
Consultants	\$ XXXXXXXXXXXX	\$	\$
Travel/Subsistence	\$ XXXXXXXXXXXX	\$	\$
Equipment	\$ XXXXXXXXXXXX	\$	\$
Indirect Costs	\$ XXXXXXXXXXXX	\$	\$
Supplies/Other Operating Expenses	\$ XXXXXXXXXXXX	\$	\$
Totals:	\$	\$	\$
Project Grand Total: \$			